PTO/SB/01 (05-03)

Approved for use through 04/30/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. **Attorney Docket Number** 1656(TA&T) **DECLARATION FOR UTILITY OR** First Named Inventor **DESIGN** Wegand, John C. PATENT APPLICATION **COMPLETE IF KNOWN** (37 CFR 1.63) **Application Number** Filing Date Declaration Declaration Submitted OR Submitted after Initial Art Unit With Initial Filing (surcharge Filing (37 CFR 1.16 (e)) **Examiner Name** required) I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Friction Testing Device (Title of the Invention) the specification of which 1 is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. **Prior Foreign Application** Foreign Filing Date **Priority** Certified Copy Attached? Number(s) Country (MM/DD/YYYY) **Not Claimed** <u>Yes</u>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. [Page 1 of 2]

This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to:		er Number ode Label				PR 🗀	Corres	pondence address below		
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PATENT TRADEMARK OFFICE Address										
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NAME OF SOLE OR FIRST INVENTOR:  A petition has been filed for this unsigned inventor										
Given Name				Junoi.		amily Name	5 Urioigii	160 Inventor		
(first and middle [if any]) John C.					or	r Surname /egand				
Inventor's					<del>)                                    </del>			Date		
Signature	$C_{i}$	7		/	_			1 OCT 7003		
Residence: City	State	<del></del>	T	Count	try	1	Citizen			
Waldorf	MD		\	USA		J	USA			
Mailing Address 3405 Elsa Avenue	<u></u>									
OTOU LISE ATOMES								٠.		
City	State			$\overline{}$	ZIP		$\overline{}$	Country		
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NAME OF SECOND INVENTO	/R:						n filed fo	or this unsigned inventor		
Given Name	<del>_</del>					mily Name				
(first and middle [if any]) David E.					or S Pala	Surname aith				
Inventor's Signature	15 Pal	1:H	_					Date 1 Oct 2003		
Residence: etty	State	mu-	$\overline{}$	Count	try		Citizen			
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Arnold	MD			2	21012 USA					
Additional inventors or a legal rep	presentative are bein	no named on	the 1 su	unoleme	ntal shee	et(s) PTO/SB/02A	or D2LR a	ittached hereto		

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PTO/SB/02A (11-00)

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## **DECLARATION**

ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>

Name of Additional Joint Inventor, if a	[	A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any	<u>'l)</u>			Family N	ame or S	Surname				
Keith E.		Lucas								
Inventor's Signature					Date 10/1/03					
Residence: City Upper Marlboro	State	MD	<sub>Country</sub> USA		۲	Citizenship USA				
Mailing Address 15901 Croom Airport Road										
Mailing Address										
<sub>city</sub> Upper Marlboro	State	MD	ZiP	20773	Count	<sub>ry</sub> USA				
Name of Additional Joint Inventor, if a	ny:		A petit	tion has been fil	led for th	nis unsigned inventor				
Given Name (first and middle [if any	1)		Family Name or Surname							
Inventor's Signature				Date						
Residence: City			Country			Citizenship				
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					A petition has been filed for this unsigned inventor					
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PTO/SB/81 (05-03)

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number Filing Date First Named Inventor **POWER OF ATTORNEY OR** Wegand, John C. Title **AUTHORIZATION OF AGENT** Friction Testing Device **Art Unit Examiner Name Attorney Docket Number** 1656(TA&T) I hereby appoint: Practitioners at Customer Number 30010 OR Practitioner(s) named below: PATENT TRADEMARK OFFICE Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Place Customer Practitioners at Customer Number. Number Bar Code Label here OR Firm or Individual Name Address Address City State Zip Country Telephone Fax am the: ~ Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name ✓Wegand Signature Date Telephone 301-396-8330 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

\*Total of

forms are submitted.

PTO/SB/81 (05-03)

Approved for use through 11/30/2005, OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number **Application Number Filing Date First Named Inventor POWER OF ATTORNEY OR** Wegand, John C. Title Friction Testing Device **AUTHORIZATION OF AGENT** Art Unit **Examiner Name Attorney Docket Number** 1656(TA&T) I hereby appoint: Practitioners at Customer Number 30010 OR Practitioner(s) named below: PATENT TRADEMARK OFFICE Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Place Customer Practitioners at Customer Number. Number Bar Code Label here OR Firm or Individual Name Address Address City State Zip Country Telephone Fax am the: ~ Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Signature Date Telephone

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

forms if more than one signature is required, see below\*.

forms are submitted.

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number Filing Date First Named Inventor **POWER OF ATTORNEY OR** Wegand, John C. Title **AUTHORIZATION OF AGENT** Friction Testing Device Art Unit **Examiner Name Attorney Docket Number** 1656(TA&T) I hereby appoint: Practitioners at Customer Number 30010 OR Practitioner(s) named below: PATENT TRADEMARK OFFICE Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Place Customer Practitioners at Customer Number. Number Bar Code Label here OR Firm or Individual Name Address Address City State Zip Country Telephone Fax I am the: ~ Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Łucas Signature Date Telephone 2027670833 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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